



State of Connecticut
Department of Public Safety
Division of State Police

DPS-90-C (Rev. 04/03)

CRIMINAL INFORMATION SUMMARY

☐ ADDITIONAL PAGES

TROOP / UNIT: SFTTF		OTHER INVOLVED AGENCY: <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES,	
DATE: 6/2/05	TIME:	INVESTIGATING TROOPER / OFFICER: DET. KUBISH # 1176	DPS CASE NUMBER: DPS 05. 023577
LOCATION OF INCIDENT (STREET NAME AND CITY/TOWN ONLY): 178 ROWLEY STREET, WINSTED CT			
SUMMARY OF INCIDENT OR AFFIDAVIT: <input checked="" type="checkbox"/> ARREST MADE <input type="checkbox"/> UNDER INVESTIGATION ON 5/14/05 SFTTF CONDUCTED AN AUDIT OF NICHOLS SPORTING GOODS, A LICENSED FIREARM DEALER, LOCATED AT THE ABOVE ADDRESS. THE INSPECTION REVEALED THAT THE DEALER/OWNER WAS IN POSSESSION OF FIVE UNREGISTERED ASSAULT WEAPONS. WEAPONS SEIZED AS CONTRABAND. DEALER ARRESTED ON A WARRANT FROM BANTAM COURT.			
VICTIM: (DO NOT IDENTIFY ANY JUVENILE BY NAME OR ADDRESS - IF JUVENILE, WRITE "JUVENILE" IN THE NAME FIELD & "AGE" IN DOB FIELD)			
NAME / BUSINESS / AGENCY: <input type="checkbox"/> M <input type="checkbox"/> F STATE OF CONNECTICUT		ADDRESS: (TOWN/CITY&STATE ONLY) 29 WALNUT ST. WINSTED CT. 06098	
NAME / BUSINESS / AGENCY: <input type="checkbox"/> M <input type="checkbox"/> F		ADDRESS: (TOWN/CITY&STATE ONLY)	
NAME / BUSINESS / AGENCY: <input type="checkbox"/> M <input type="checkbox"/> F		ADDRESS: (TOWN/CITY&STATE ONLY)	
ARRESTED: (DO NOT IDENTIFY ANY JUVENILE BY NAME OR ADDRESS - IF JUVENILE, WRITE "JUVENILE" IN THE NAME FIELD & "AGE" IN DOB FIELD)			
NAME: <input checked="" type="checkbox"/> M <input type="checkbox"/> F NICHOLS SR., ROBERT H.		DOB: 8/1/45	
CHARGES: 1. POSSESSION OF ASSAULT WEAPON (5 cts.)		BOND: <input type="checkbox"/> CASH <input type="checkbox"/> SURETY <input checked="" type="checkbox"/> NON-SURETY <input type="checkbox"/> WPTA AMOUNT \$: 5000.- <input type="checkbox"/> TO BE PRESENTED AT COURT <input type="checkbox"/> TRANS TO DEPT OF CORRECTIONS @:	
COURT: GA: 18		INJURED: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO AMBULANCE: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO HOSPITAL: <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	
TOWN: BANTAM		DATE: 6/21/05	
NAME: <input type="checkbox"/> M <input type="checkbox"/> F		DOB:	
CHARGES: 1. 2. 3. 4.		BOND: <input type="checkbox"/> CASH <input type="checkbox"/> SURETY <input checked="" type="checkbox"/> NON-SURETY <input type="checkbox"/> WPTA AMOUNT \$: <input type="checkbox"/> TO BE PRESENTED AT COURT <input type="checkbox"/> TRANS TO DEPT OF CORRECTIONS @:	
COURT: GA:		INJURED: <input type="checkbox"/> YES <input type="checkbox"/> NO AMBULANCE: <input type="checkbox"/> YES <input type="checkbox"/> NO HOSPITAL: <input type="checkbox"/> YES <input type="checkbox"/> NO	
TOWN:		DATE:	
NAME: <input type="checkbox"/> M <input type="checkbox"/> F		DOB:	
CHARGES: 1. 2. 3. 4.		BOND: <input type="checkbox"/> CASH <input type="checkbox"/> SURETY <input type="checkbox"/> NON-SURETY <input type="checkbox"/> WPTA AMOUNT \$: <input type="checkbox"/> TO BE PRESENTED AT COURT <input type="checkbox"/> TRANS TO DEPT OF CORRECTIONS @:	
COURT: GA:		INJURED: <input type="checkbox"/> YES <input type="checkbox"/> NO AMBULANCE: <input type="checkbox"/> YES <input type="checkbox"/> NO HOSPITAL: <input type="checkbox"/> YES <input type="checkbox"/> NO	
TOWN:		DATE:	
NAME: <input type="checkbox"/> M <input type="checkbox"/> F		DOB:	
CHARGES: 1. 2. 3. 4.		BOND: <input type="checkbox"/> CASH <input type="checkbox"/> SURETY <input type="checkbox"/> NON-SURETY <input type="checkbox"/> WPTA AMOUNT \$: <input type="checkbox"/> TO BE PRESENTED AT COURT <input type="checkbox"/> TRANS TO DEPT OF CORRECTIONS @:	
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TOWN:		DATE:	
NAME: <input type="checkbox"/> M <input type="checkbox"/> F		DOB:	
SUPERVISOR'S APPROVAL REQUIRED: INITIALS: 20 ID #: 125 DATE: 6/2/05			
THIS INFORMATION IS BEING RELEASED TO THE PUBLIC IN COMPLIANCE WITH THE FREEDOM OF INFORMATION LAWS. FOR ADDITIONAL INFORMATION ON MAJOR CRIMES OR ARRESTS, CONTACT THE CONNECTICUT STATE POLICE PUBLIC INFORMATION OFFICE. PHONE: 860-685-8230 FAX: 860-685-8301 TO BE			